

Warren Featherstone Reid Award for Excellence in Health Care Nomination for 2003 Award

The Washington Legislature created the Warren Featherstone Reid Award for Excellence in Health Care in 1994. The award, which honors the career of a dedicated public servant and health policy expert, showcases successful efforts to increase access to health care by delivering quality health care services in a cost-effective manner. For more details, contact the Washington State Board of Health by calling (360) 236-4110 or visiting the Board's Web site at www.doh.wa.gov/sboh/.

The nomination form and accompanying materials must be postmarked, hand-delivered or sent by electronic mail on or before December 31, 2001. Please send all materials to:

Warren Featherstone Reid Award
Washington State Board of Health
1102 Quince SE
PO Box 7990
Olympia, WA 98504-7990
(360) 236-4110
sboh@doh.wa.gov

NOMINEE

If nominee is a individual health care provider:

Name Ellen Jeffcott, RDH, BS
Position Dental Programs Manager, Public Health Seattle and King County
Contact number 206-205-5816 or ellen.jeffcott@metrokc.gov

If nominee is a health care facility:

Name of facility
Type of facility
Name of CEO
Contact number

NOMINATE BY

Name Beth Hines, MPH
Position Health Services Consultant
Washington State Department of Health
Address PO Box 47816
Olympia WA 98504-7816
Phone/Fax 360-236-4607
E-mail beth.hines@doh.wa.gov

Warren Featherstone Reid Award *For* Excellence In Health Care
Nomination

ELLENJEFFCOTT,RDH,BS
Dental Programs Manager
Public Health Seattle King County

I am nominating Ellen Jeffcott *to* be awarded the Warren Featherstone Reid Award *For* Excellence in Health Care. Ms. Jeffcott has been employed by Public Health Seattle King County for almost twenty years working *to* increase access *to* dental care for underserved and low-income families and individuals. This *work* has included all aspects *of* public health community-based, school-based and clinical services. This is a *not* simply a career focused on Seattle King County. If that were *not* enough, Ms. Jeffcott has influenced state policy and provided national models on oral health prevention.

Dental decay (caries) is a complex disease and requires complex solutions that involve many aspects *of* health including nutrition, behavior modification, preventive interventions and treatment as well as overcoming sociologic and economic barriers. Over the twenty years that Ms. Jeffcott has been a leader in the state *of* Washington in oral health, she has been at the *forefront* in understanding the new research and applying the science and new dental technologies involved in such interventions as dental sealants and uses *of* fluoride. She provided the pilot sites and research for the first school dental sealant program in the state. This was followed by the development *of* the model *for* the recording *of* screenings *of* students for dental sealants. This became a model *for* other states. The Seattle school programs under Ms. Jeffcott's management guided the state toward its own state school dental sealant program and allowed the state *to* formulate state policy based on experiences and guidance from Ms. Jeffcott. She was also a committee member and assisted in the writing *of* guidelines *for* state publications and curriculums on oral health.

In the last ten years, the lack *of* access *to* dental care has reached crisis levels in *our* state. The Legislature held special subcommittee hearings in 1995 on oral health care access. The Washington State Oral Health Coalition, *of* which Ms. Jeffcott is a founding member, participated in hearings and Ms. Jeffcott was able *to* provide evidence *of* the serious lack *of* access *for* low-income children and adults in Seattle and King County. She was a member of the Medicaid clinical provider/ public health task force that revamped the Medicaid fees and guidance in order *to* simplify and make the Medicaid billing process easier and more attractive *to* dentists.

Public Health Seattle King County promoted Ms. Jeffcott *to* manager *of* all dental programs at a time when the five dental clinics were in serious trouble. She had been there in the clinics assuring that the dental staff members were using materials translated *to* the many languages spoken in that large multicultural metropolitan area. She was the one *to* remind the staff *to* include oral health in maternal and child health clinics. She was tracking the problems with Medicaid rates and the revenue drop. She took on the challenge and pulled the clinics out *of* what had been perceived as a "natural slump". The statistics are impressive, as you will note in the accompanying information. The dental clinics are turning a profit for the first time in years.

Patient visits are increasing. Oral Health services are being integrated with Head Start, ECEAP, and Occupational Skills Centers, prison programs, maternal and child health programs and other services.

Access to oral health care is still one of the greatest challenges the residents of Washington State face today. Ellen Jeffcott has been working on this challenge for almost twenty years in Seattle and King County and in our state and has guided the way for successful state policy and programs. She deserves to be awarded this prestigious award for excellence in health care.

Warren Featherstone Reid Award
Washington State Board of Health
1102 Quince SE
PO Box 7990
Olympia, WA 98504-7990

Nomination Committee,

Please accept my support for the nomination of Ellen Jeffcott for the Warren Featherstone Reid Award for excellence in healthcare. I have known Ellen for over twenty years and she has been the dental public health professional that has been most influential in my professional career. In addition to the comments that Beth Hines nomination letter has included, let me add a few others. The work that Ellen Jeffcott does is often in the background, laying the groundwork and direction for improvements in oral healthcare systems. For example, she was a major contributor to the addition of oral health section to the childcare provider reference manual used by nearly every childcare in Washington State. She is always willing to mentor health care professional students (AS, BS, MPH, DDS, MD, ARNP etc) from any college or university. She contributes to the improvements in oral health curriculum through participation as an adjunct faculty member of the University of Washington. Her work is not only with Public Health Seattle King County but extends to services to Washington State, such as the Washington State Sealant and Varnish Guidelines in which she lead the way in the development of the quality assurance tool. It is her complete understanding and commitment to improvements in the health care systems that are her greatest achievement and lead to her most valuable contributions. I whole heartedly support Ellen Jeffcott's nomination.

Sincerely,
LeeAnn Hoaglin Cooper, RDH,BS

Jan. 9, 2004

Warren Featherstone Reid Award
Washington State Board of Health – Linda Lake, Chair
Attn: Jennifer Dodd
PO Box 7990
Olympia, WA 98504-7990

Dear Ms. Lake and Members of the Board,

The Washington State Oral Health Coalition is pleased to support the nomination of Ellen Jeffcott, RDH, BS, Dental Program Manager, Public Health Seattle & King County, for the Warren Featherstone Reid Award for Excellence in Public Health. Ms. Jeffcott is one of the Washington State Oral Health Coalition's founders, and we are very proud of her.

Ellen Jeffcott has proved herself a tireless and effective advocate for improved oral health care access and capacity for low income populations both in King County and throughout the state. Having served for nearly 20 years with SeaKing Public Health, she has championed oral health education and disease prevention through the development, implementation, and tracking of successful dental sealant programs while employing her significant management skills to expand delivery of restorative care as well.

Ms. Jeffcott has also served the broader oral health community as a key advisor for policy development and a nationally recognized representative of the progressive mindset that has enabled Washington State to become a leader in the public health war against tooth decay, the number one infectious childhood disease. Through her steadfast commitment to documenting issues and finding workable solutions, Ellen Jeffcott has set a standard for public health performance deserving of such prestigious recognition as the Warren Featherstone Reid Award.

Thank you for this opportunity to comment,

Washington State Oral Health Coalition
Pat Brown, Chair

January 6, 2004

Nomination Committee

Warren Featherstone ("Feather") Reid Award for Excellence in Health Care
Washington State Department of Health
Olympia, WA

Nominee:

Ellen Jeffcott, Oral Health Services Manager, Community Health Services Division, Public Health Seattle-King County

It is with pleasure that I support the nomination of Ellen Jeffcott, Oral Health Services Manager, Community Health Services Division of Public Health Seattle-King County. I can detail some of her achievements beginning with the early 1980's when she provided expert consultation to the University of Lisbon (UL) Oral Hygiene Program (Portugal) during their formative years. There she brought skills in administration and management as well as her clinical prowess to the Portuguese Ministries of Health, Labor, and Economics as she worked with the University's Dental School toward inclusion of preventive dentistry curricula into the predoctoral and dental hygiene programs. Now, twenty years later, that country has a national oral health program with dental sealant services, education, and other preventive services being administered throughout the country in conjunction with the academic programs of the UL and through funded positions with the Ministry of Health, Division of Primary Care.

By mid-1980 with Mrs. Jeffcott's leadership, Seattle had established a dental sealant pilot project, the first public dental sealant program in Washington State (WS). From this start and with her expert guidance, WS Department of Health now has dental sealant programs serving school children in the majority of its local health jurisdictions.

By the 1990's and into the present, Mrs. Jeffcott made major contributions to both academic and research fields. As an affiliate faculty of the University of Washington School of Dentistry (UW), she has served as site coordinator and instructor for student projects related to homeless, HIV/AIDs, geriatric oral health, children's dental services, homeless, and HIV/AIDS, to name a few. She has coordinated activities with UW investigators for site selection, study intake, and service delivery projects funded by the Centers for Disease Control, Institute on Aging, and National Institutes of Health, including the Dental Craniofacial Institute of Health. One particular work merits mention. It was carried out in the 1990's during a time when Mrs. Jeffcott invested energies into understanding why so many families with school-aged children avoided preventive dental services for their children. Her work led to a 1998 publication, "An Explanatory Model of Dental Care Utilization of Low-income Children" (Medical Care 4:554-566) which in 1999 won The

William J. Gies Award, an award made annually for the best paper published in dental research during the previous year.

Presently, Mrs. Jeffcott serves as a member of the UW dental hygiene work group for future directions and as an instructor of student projects related to early childhood caries and preventive strategies. Of course, this is in addition to her regular work managing dental clinics with intent to improve clinical processes and patient care while maintaining and improving clinical productivity. This is no easy task and requires building positive support among a vast number of clinicians and other healthcare providers.

Too, Mrs. Jeffcott advises on initiatives related to oral health services, both to the state and nationally. She coordinates education and services in order to improve services among Medicare and Medicaid participants. Furthermore, she was a founding member of the Washington Oral Health Coalition and is recognized as national leader of public health dentistry and dental hygiene.

Truly, Mrs. Jeffcott exemplified the work of Dr. Reid. She is a person who continuously demonstrates by performance her organizational leadership capabilities and her commitment to prevention and early diagnosis, while helping others find access to health services when in need. She does this while retaining a vision for a future healthier world. Above all, she brings a smile and good humor along with intellectual discovery to those with whom she works. Thus, it is without reservation that I support the nomination of Ellen Jeffcott for the Warren Featherstone Reid Award for Excellence in Health Care.

Sincerely,

Norma J. Wells

Norma Wells, BS, RDH, MPH
Associate Professor and Director
Adjunct Associate Professor of Oral Biology
Coordinator, UW Oral Health Collaborative



HEALTHY PEOPLE. HEALTHY COMMUNITIES.

ORAL HEALTH PROGRAM

EXECUTIVE SUMMARY

2002 – 2003

MISSION AND GOALS

The mission of the Oral Health Program is to improve the oral health status of King County residents and reduce the level of dental disease in accordance with the U.S. Healthy People Year 2010 Goals and the Washington State Public Health Improvement Plan.

To accomplish this mission, the Promotion Program will:

- ♦ Assess the level of dental disease through early identification
- ♦ Assure the provision of primary preventive dental services
- ♦ Increase access to dental care for at-risk and underserved populations
- ♦ Provide communities with relevant oral health information.
- ♦ Improve systems to deliver dental care
- ♦ Monitor Healthy People 2010 Oral Health Goals

Introduction

- Dental decay (caries) is an infectious disease that is preventable through the use of fluorides, dental sealants and early treatment. Currently, 75% of King County residents are on fluoridated water systems surpassing Washington State's goal of 55% of the population.
- According to the Smile Survey 2000 report, 37% of 8 year old children in King County have at least one dental sealant. The Year 2010 Health Goal for the presence of dental sealants in 8 year old children is 50%.
- Early intervention by dental professionals reduces both the severity and frequency of dental disease. Medical Assistance Administration (MAA) data shows 36.5% of all children on Medicaid in King County went to a dentist in the year 2002, a 2% increase from 2001.

2002 – 2003 HIGHLIGHTS

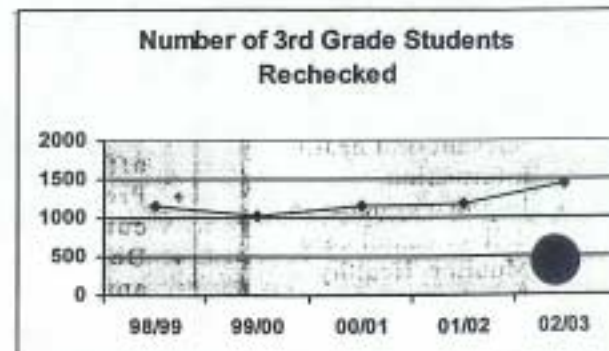
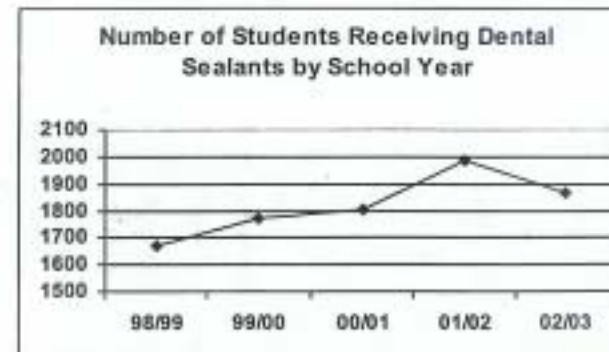
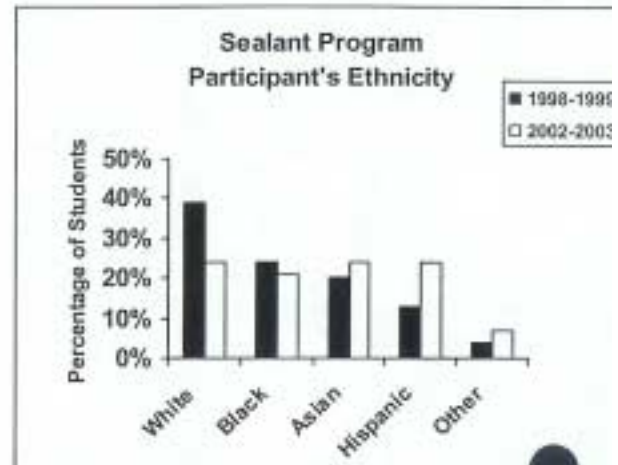
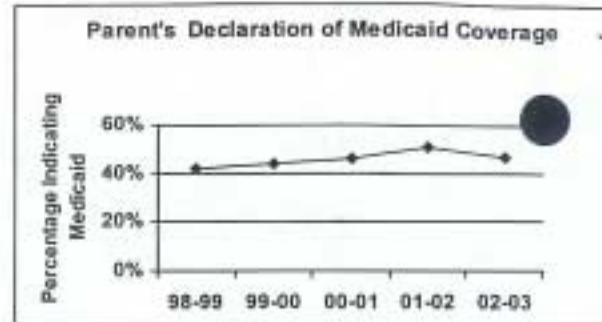
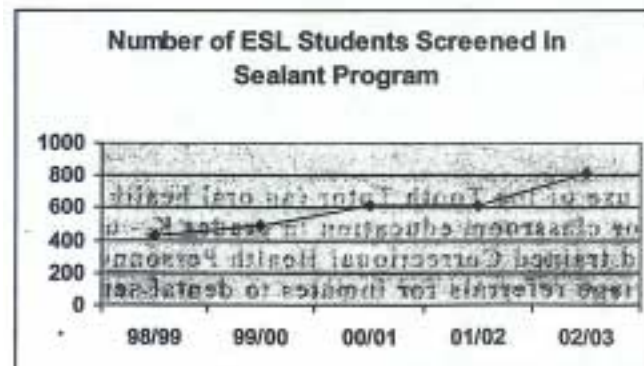
- ♦ Delivered preventive services (sealants, health education and referral) to 58 schools in King County through the sealant program
- ♦ Conducted assessments at 18 sites in King County
- ♦ Provided Technical Assistance by providing oral health assessment trainings with supporting materials
- ♦ Developed oral health messages for inclusion in Child Profile
- ♦ Supported Best Beginnings, a program for pregnant teens, with appropriate oral health messages
- ♦ Participated on community advisory boards: Head Start/ ECEAP, Early Head Start, Occupational Skills Center, Community Health Access Program (CHAP—a telephone service to place clients into dental in private/public offices)
- ♦ Promoted the use of the Tooth Tutor (an oral health curriculum) for classroom education in grades K - 6
- ♦ Developed and trained Correctional Health Personnel in appropriate triage referrals for inmates to dental services
- ♦ Initiated pilot project to provide clinical hygiene services to pregnant women at Renton Dental Clinic
- ♦ Implemented HIPAA policy

Primary Preventive Dental Services

Primary preventive oral health strategies include fluorides and sealants to prevent decay. While fluoride has been effective in reducing smooth surface tooth decay, over 89% of dental decay is now found in the pits and grooves of teeth. To address this problem, PH-SKC has implemented the public health strategy of placing pit and fissure sealants in first permanent molars. Since 1986, the Oral Health Program has conducted school-based sealant placements in selected second grade students. The program has increased in scope yearly as resources allowed. Results of the 2002-2003 school year indicate:

- 82% of consent forms were returned
- 2339 students were screened in 58 schools in King County
- 33% of students had untreated decay
- 61% of students had a history of decay
- 1869 students received sealants
- 6059 teeth were sealed
- 1441 students were rescreened
- 52% of the students referred for untreated disease last year still had untreated caries

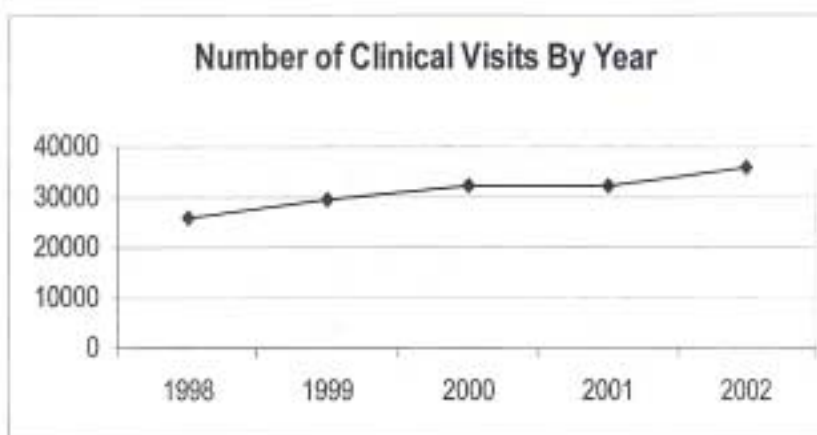
Number of Teeth Sealed by School Year					
	98/99	99/00	00/01	01/02	02/03
# Teeth sealed	5932	6300	6192	6704	6059



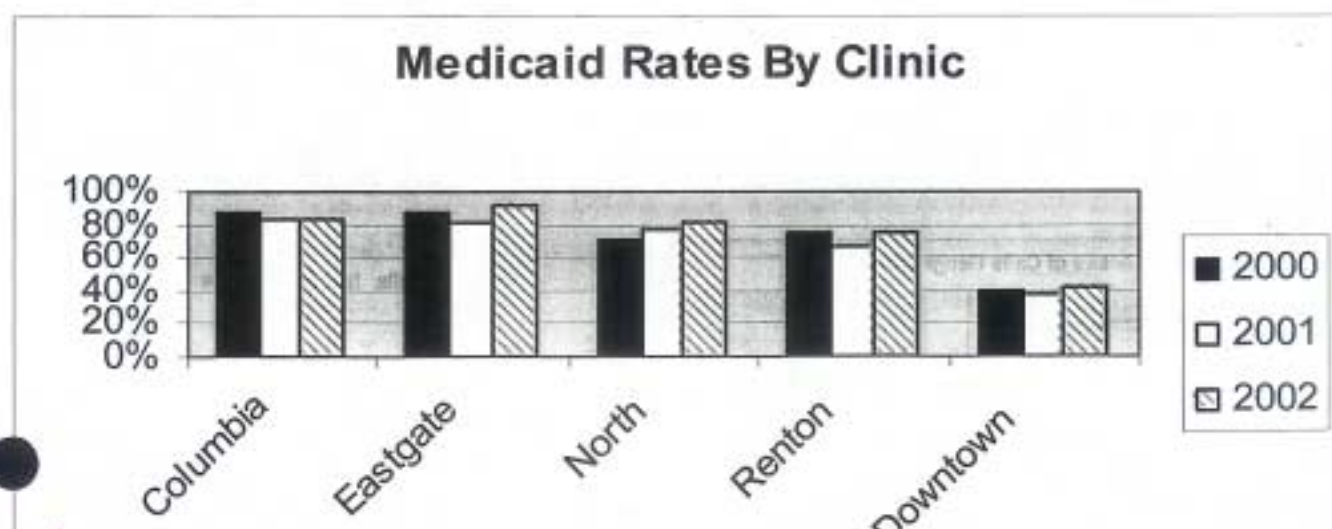
Primary Dental Clinical Services

Public Health- Seattle & King County operates 5 dental clinics serving high risk populations throughout the county. Primary dental services (exams, x-rays, fillings, extractions, etc.) are provided to children under 19 years old, pregnant women referred from other public health programs, seniors over 60 and homeless popula-

Dental Program Finances		
Year	Expense	Revenue
1999	4,614,521	3,416,462
2000	3,806,525	4,498,406
2001	3,917,134	3,056,955
2002	4,091,525	5,300,924



Number of Visits By Clinic				
	1999	2000	2001	2002
Renton	5939	7044	6472	7060
Eastgate	7363	5460	7018	7932
North	4982	6689	6645	7780
Downtown	3339	3709	3904	3741
Columbia	8099	9450	8245	9195
Total	29,722	32,338	32,322	35,708



Healthy People 2010 Oral Health Goals

21-1 Reduce the proportion of children and adolescents who have dental caries experience in their primary or permanent teeth.

Caries Experience	Target Goal	PHSKC Program Data
Ages 2 to 4	11%	26%
Ages 6 to 8	42%	60%

21-2 Reduce the proportion of children, adolescents, and adults with untreated dental decay.

Untreated Decay	Target Goal	PHSKC Program Data
Ages 2 to 4	9%	20%
Ages 6 to 8	21%	32%

21-8 Increase the proportion of children who have received dental sealants on their molar teeth.

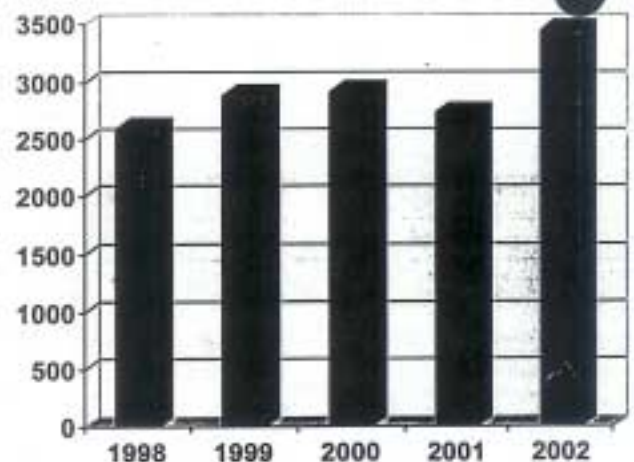
Sealants	Target Goal	PHSKC Program Data
Age 8	50%	37%

Community Health Access Program

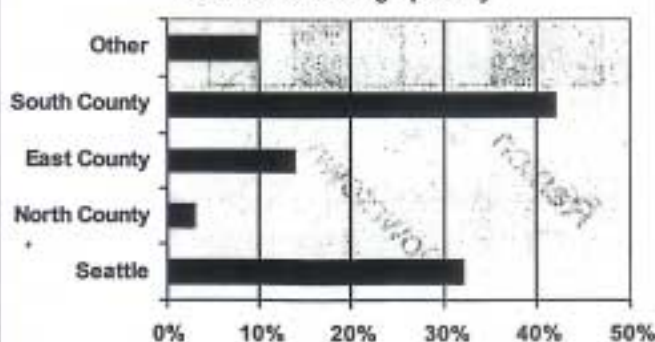
The department contracts with the Community Health Access Program (CHAP) to provide dental placement for children covered by Medicaid or from low income families unable to locate a primary dental care provider. The program has expanded to place children for routine as well as emergency dental care. In 2002, there were 3076 calls, with 3440 referrals made. This is an increase from the 2732 referrals made in the year 2001.

- 75% were Medicaid covered
- 58% were for routine care, 35% for emergent/urgent dental care, 4% for orthodontics, 2% for other dental needs, and <1% for Early Childhood Caries (ECC)
- 42% of clients resided in South King County
- In 1995, 10% of calls were from clients 19 and older. In 2002, 41% of calls were from this age group.

Number of Dental Referrals



Areas of Calls Geographically



Calls for Adult Care

